Introduction to Melioidosis: Burkholderia pseudomallei

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Introduction

- The Disease: Melioidosis
- □ **The Bacteria:** Burkholderia pseudomallei

Clinical Forms of Melioidosis

Pneumonia or other respiratory infection

(Most common presentation)

- Skin infection
- Pockets of pus throughout body
- Blood infection
- Nervous system infection (less common)



Risk Factors

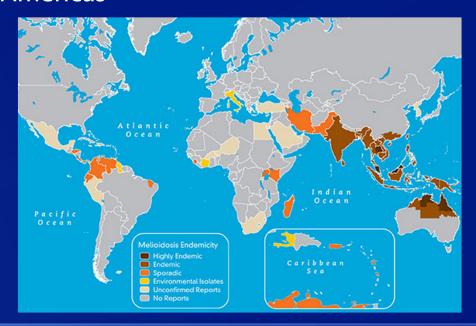
- One or more factors present in 80% of patients.
 - Diabetes
 - Liver disease
 - Kidney disease
 - Chronic lung disease
 - Problems with immune system

Treatment

- Intravenous antibiotics for up to two weeks followed by 3 to 6 months of oral antibiotics in severe cases
- Oral antibiotics alone for milder cases

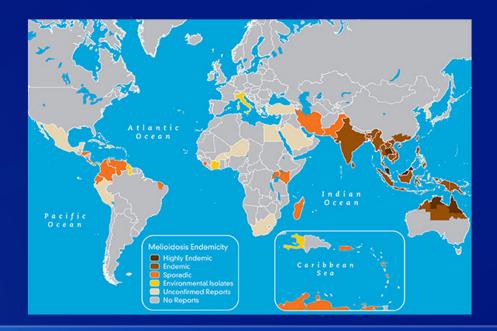
Geographic Distribution

- Most commonly seen in tropical and subtropical areas
 - Endemic in areas such as Southeast Asia, northern Australia, Papua
 New Guinea, the Indian subcontinent and southern China
 - Sporadic cases reported from southwest Asia, Africa, the Caribbean and Central and South America
 - About 10 cases per year seen in the United States as well as sporadic cases elsewhere in the Americas



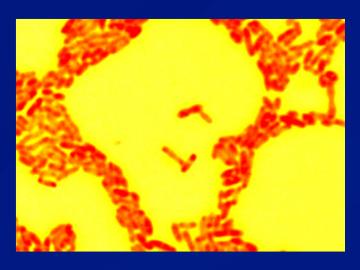
Geographic Distribution

- Most commonly seen in tropical and subtropical areas
 - 2000 to 3000 cases per year average in Thailand
 - 50 cases per 100,000 people in northern Australia
 - More sporadic in other regions



Burkholderia pseudomallei

- ☐ Tier 1 Select Agent
- ☐ Found in water and moist soil
- Opportunistic pathogen
- Causes human and animal disease
- ☐ Time from exposure to sickness
 - □ 1 to 21 days
 - ☐ Average of 9 days in humans
 - ☐ Can be decades





Transmission

Routes of infection

- skin wound contact with soil or water
- Touching or drinking water
- Breathing in water mist or dust

Transmission

- Person to Person Extremely rare
- Animal to Animal
 - Indirect via contaminating area with waste products
 - Little known about spread by direct contact
- Animal to Human
 - Indirect via contaminating area with waste products

Thank You Questions?



For more information please contact Centers for Disease Control and Prevention

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

